U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form-approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8080	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2. Fiscal Year Covered From:
	[] / [] / [2004] Through: []2 / 3] / 2004
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name DEEK L FISHER	Name MATIONNU BASKETEAU PLAYERS ASSOCIATION
	Labor Organization File Number Q00015
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 14724 VENTURA BUD, PRNTUQUIE	Street Z PENN PLAZA SULTE #2430
CITY SHEEMAN DAKS	city NEW
State CA ZIP Code + 4 Q1403	State NEW YORK ZIP Code + 4 [1012]
5. Position in labor organization. VICE—PRESTORNT	
(except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
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P.O. Box, Bldg., Room No., if any	7.b. Amount.
P.O. Box, Bldg., Room No., if any Street	7.b. Amount.
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P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	ture erjury and other applicable penalties of the law, that all of the information
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signa 15. Signature and verification. The undersigned declares, under penalty of P submitted in this report (including the information contained in any accompany).	ture erjury and other applicable penalties of the law, that all of the information

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of busy'ng from, selling or leasing to, or otherwise dealing with the business (2) any part of which consists of hosping from or selling or leasing to, is suchely sealing to represent, or (2) any part of which consists of hosping from or selling or leasing to its suchely sealing to represent, or (2) any part of which consists of hosping from or selling perspectation is interested. 8. Name and address of Business (including trade name, if any). Name Trade Name, if any: 10. If 3b, or 9c, is checked give trust or employer's name. 11.a. Nature of such dealing. 11.a. Nature of such dealing. 11.a. Nature of such dealing. 11.a. Nature of interest held or income received. 11.b. Approximate dollar value of such dealing. 12.b. Amount. 12.b. Amount. 12.b. Amount. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). 14.a. Nature of payment.	Destinated part of which consists of buying from, selling or leasting to, or otherwise dealing with the business in an employer viscose employees your later or organization represents or is actively selling to with your later organization represents or is actively selling with your later organization represents or is actively selling with your later organization represents or is actively selling with your later organization represents or is active with your later organization or within a trust is winching your later organization or within a trust is winching your later organization or within a trust is winching your later organization or within a trust is winching your later organization. Visit Destination Desti	Name of Person Filing	File Number U-	
Name Trade Name, if any:	same	substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise		
Trade Name, if any:	a. Labor Organization rade Name, if any: .O. Box, Bidg., Room No., if any treet .D. If 9.b. or 9.c. is checked give trust or employer's name. ame	8. Name and address of Business (including trade name, if any).	9. Business deals with:	
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